

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	pw		17-05-01
<b>O.I.P.E. CLASSIFIER</b>			17-12-01
<b>FORMALITY REVIEW</b>	HL	1074	02/15/01
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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Claim	Date
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Claim	Date				
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If more than 150 claims or 10 actions  
staple additional sheet here

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